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1852

SKETCHES OF  
MILITARY SURGERY,

AN INTRODUCTORY DISCOURSE

DELIVERED TO THE

KENTUCKY SCHOOL OF MEDICINE,

BY

PROF. J. B. FLINT.

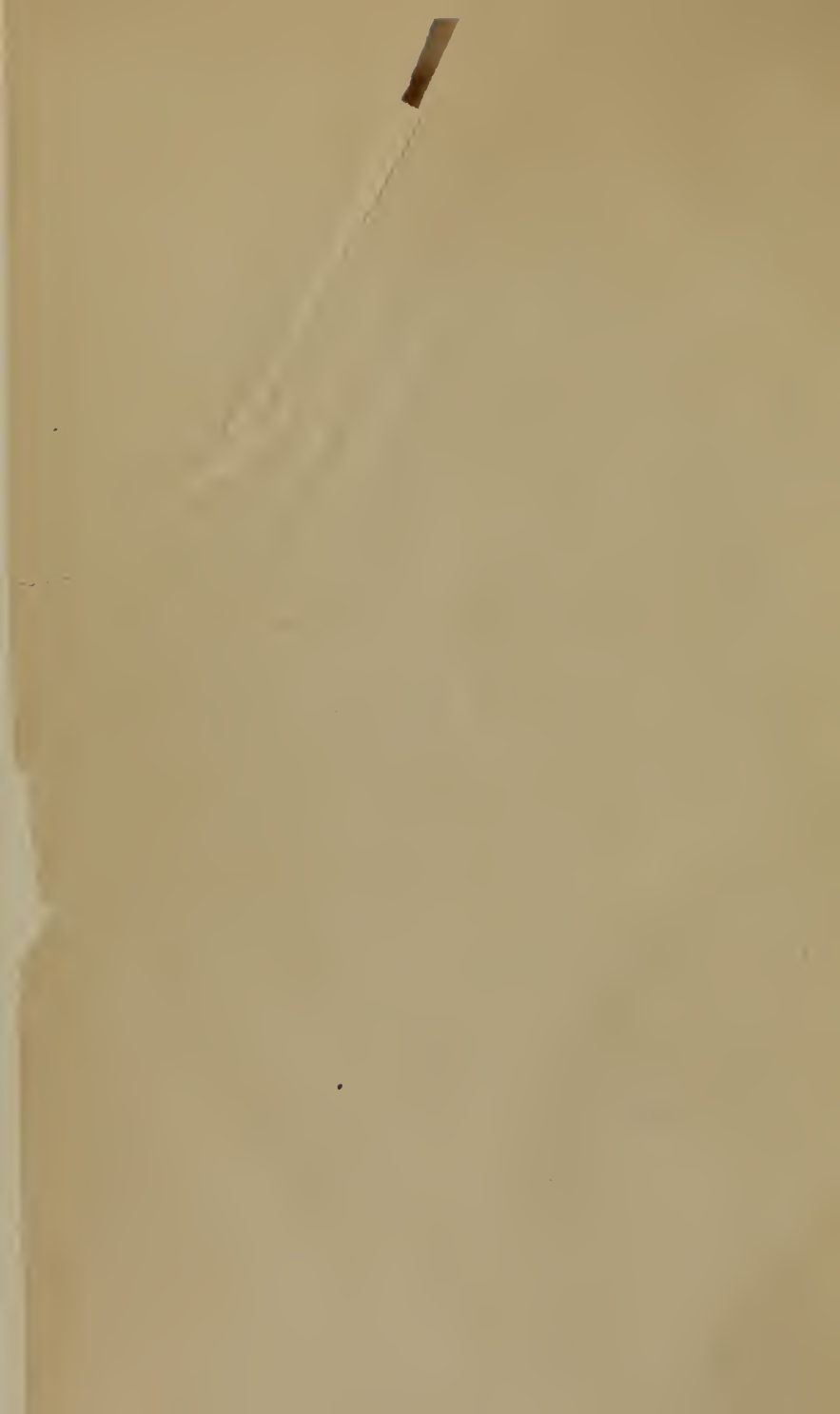
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# A DISCOURSE

DELIVERED TO THE CLASS OF THE

KENTUCKY SCHOOL OF MEDICINE,

NOVEMBER 3, 1852,

INTRODUCTORY TO A COURSE ON SURGERY,

BY

JOSHUA B. FLINT,

Professor of the Principles and Practice of Surgery.

Louisville:

HALDEMAN & CO., COURIER OFFICE.

1852

Med. Mil.  
~~Sing. Mil.~~

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F624d

1852

## CORRESPONDENCE.

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LOUISVILLE, Nov. 10th, 1852.

PROF. J. B. FLINT:

DEAR SIR:

At a meeting of the present class of the Kentucky School of Medicine, it was voted to request a copy of your Introductory Address, for publication, and the following gentlemen were appointed to confer with you on the subject.

Wm. Hughs,            Wm. H. Bryant,  
E. D. Standiford,    T. C. Parrish,  
R. Shadburn,        R. G. English.  
S. S. GRIMES, Chm'n.

A. B. COOK, Sec'y.

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LOUISVILLE, Nov. 14th, 1852.

GENTLEMEN:

I thank you for your polite note of the 10th inst., written in behalf of your classmates, to request a copy of my Introductory Lecture, for publication. The address was prepared only for my class, and if it satisfied and pleased them, as your communication authorizes me to believe, the little extra labor devoted to its preparation, has been abundantly rewarded. If, however, it will gratify them still farther to see it in print, they may be assured that I am not insensible to the compliment involved in their request, and cheerfully place the manuscript at their disposal.

With assurances of sincere esteem for yourselves and those you represent, I remain, gentlemen, very truly,

Your preceptor and friend,

JOSH. B. FLINT.

To Messrs. S. S. Grimes,    A. B. Cook,  
                  Wm. Hughs,        W. H. Bryant,  
                  E. D. Standiford,    T. C. Parrish,  
                  R. Shadburn,        R. G. English.

Committee of the Class of the Kentucky School of Medicine.





## LECTURE.

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GENTLEMEN: It is my custom to employ the first hour allotted to my course on the principles and practice of surgery upon some professional themes, not likely to find a place in the systematic arrangement of topics for our subsequent interviews—germain, indeed, as I intend to have them, to the proper subject of the course, but not an essential part of it.

It is neither becoming nor profitable, to precipitate one's self upon any subject or endeavor, in which we are about to engage. The Athlete, standing in the presence of his antagonist, preludes the impending struggle, by varied attitude and gesture, calculated to rally and discipline his muscular forces. The Knight, about to do battle for love, or for honor, rehearses the maxims of chivalry, and expatiates upon all that is animating and exemplary in the past achievements of his order. The Author, with a parent's solicitude for the creation of his intellect, salutes his reader in a preface, presenting attractive views of the subject of his volume, and conciliating the favor of his patrons by a foretaste of the genius or learning, in which he intends its pages shall abound.

Under favor of precedents so valiant and sage, the didactic lecturer may pause at the confines of his field of labor, sketch a panorama of the region he is to explore, or picture in detail, such features of the landscape as promise best to win the attention of his auditors, and forestall their interest in his subsequent performances.

Accordingly, I have thrown into the form of a discourse, for the present occasion, some dessultory remarks upon the subject of *Military Surgery*.

"It is not enough," says Mr. Chevalier, in his Hunterian oration of 1821, "that we advert to the benefits derived from surgery, in the comparatively tranquil and measured course of civil life; we must not forget what it has accomplished in

other and more turbulent scenes. We must turn to those seas, and fields, and mantling walls, over which the thundering cannon has roared, where fire and sword have met in awful conjunction, to support or to oppose unrelenting ambition. How many lives have been preserved, how many days and nights of agony and torment have been prevented, what solace and consolation have been afforded, in the slow and gloomy hours of anguish, by the firm and faithful hand which surgery has been enabled to stretch forth to the relief of the suffering brave."

As part and parcel of WAR, that strangely fascinating element of the world's existence and history, this species of professional duty, has a fund of interest independent of its technicals; appealing, in many instances, with great effect, to the heroic element so universal and active in mankind. Indeed, it is a curious fact, not often adverted to, that martial medicine has sustained a remarkable historical relation to all the heroic periods and personages of our race.

There are no earlier records of surgery, regarded as the art of *manual medication*, than are to be found in the ancient and noble Epic, to which we are indebted for most that we know of that eminently heroic age, signalized by the expedition of the Argonauts and the Trojan war.

Hardly a royal or distinguished person of this age is to be named, to whom some species of medical or surgical merit has not been awarded, by the great poetic chronicler of the times.

Jason, the daring leader of the first maritime expedition of his countrymen, and Chiron the Centaur, Telamon, Prince of Salamis, and Theseus, King of Athens, are scarcely less complimented for their chirurgical skill, than are Æsculapius himself, and his distinguished sons, who, associating the valor of the chieftain with the utmost dexterity in their paternal arts, conducted, says Homer, from the romantic Pe-neus, thirty ships and three thousand warriors to the siege of Troy. The herb *Achillea*, one species of which, the *millefolium*, has enjoyed a high medical reputation in modern times, is believed to have been so named, because its virtues were brought into use by the hero of the Iliad; and to this

same illustrious chieftain, whose medical fame has been obscured in the splendor of his warlike exploits, we are said to have been indebted for the first application of a mineral substance in surgery. Pliny relates that, in ancient pictures, it was common to represent Achilles in the attitude of scraping the verdegris, or acetate of copper, from the point of his javelin. in order to sprinkle it upon the wounds of his comrades and patients.

Under similar circumstances, the manners and sentiments of men, as well as their appreciation of things, will be much the same. Hence, the like admiration for the powers of surgery, is manifested among the chiefs and princes who flourished during the times of chivalry and the crusades, a period, in many respects, bearing a strong resemblance to the heroic age in Greece—in the romantic spirit of its enterprises, the combination of otherwise hostile leaders in a common cause, and in the general confederacy of Europe against Asia. In Ariosto, the furious Rodomont, a prince regardless of every tie human and divine, is withheld from violating the chastity of the beautiful Isabella, when completely in his power, by the promise of a wondrous medicine that would repel or cure the impression of fire, as well as a stroke of every hostile weapon, and was, therefore, calculated to raise its possessor to the summit of military glory.

“To him the damsel, would'st thou but insure,  
My honor safe, a gift thou may'st procure,  
Of far more worth than aught thou canst obtain,  
From what must fix on me eternal stain.  
Scorn not a lasting prize, a prize to raise  
O'er all the sons of War, thy deathless praise.”

HOOLE'S ORLANDO FURIOSO.

Arts are pretty sure to be valued, at all periods, according to their usefulness, and the prose compositions that celebrate the chivalrous times, as the works of Knight-errantry historical of the middle ages, are found no less lavish in their praises of surgery, than are the strains of the Italian poet. Thus, in one of the most considerable of these productions, Amadis of Gaul, the *masters*, as they are styled, or professors of this branch of healing, are every where treated, more par-

ticularly master Helisabad, with the highest deference and respect; and, as in the heroic ages of Greece, it was customary for each chieftain to learn the treatment of wounds and bruises from the lips of Chiron, so in that of chivalry, it became part of the education of every valiant knight, to be instructed in the proper management of those external injuries, to which, from the dangerous nature of his employment his frame was perpetually exposed. This amateur surgery of the heroes of the crusades, although of little account to us in a professional sense, except, as it exhibits our calling in the most honorable companionship of the times, is, nevertheless, interesting as an illustration of the contradictions in life and character, so common in that transition stage of civilization.

Christianity had softened the hearts of those haughty chieftains, but had not eradicated the passion for war—the humanizing influences of chivalry had taught them to love and succor a brother knight, but to hate and destroy their brother man, if he happened to be a Saracen. They did not perceive the incongruity of marching devastating armies through Europe and Asia, under the banner of the religion of peace. Nevertheless, that benign spirit which is ultimately to abolish all wars, had, even then, put it into the hearts of the men who were resisting it, in one way, to become its ministers in another. St. Louis, dressing the wounds and assuaging the pains of the suffering wretches on a field of battle, made bloody by his own prowess—or an order of warlike Knights, founding and serving the first hospital in the world, were not so much, according to the classical interpretations of Fournier, a realization of the ancient fable of a contest between Mars and Æsculapius, as a beautiful tribute to the genius of christianity, and an earnest of the final accomplishment of her philanthropic mission.

This therapeutical trait in the manners of chivalry, was too prominent to escape the pleasant ridicule of Cervantes, who commemorates it among the adventures of Don Quixotte, in his amusing account of the famous “Salutiferous Balsam.”

There is at this time, exhibiting in the window of one of our printshops, an amusing engraving, representing the

"knight of the rueful countenance" in the act of preparing the magical "balm of strong-arm." Having laid aside his armor, he is kneeling over the caldron, and stirring the seething ingredients, with as much solemnity and earnestness, as when lecturing Sancho, on the merits and etiquette of knight-hood.

The Romans, as conquerers of the world, owed too much to their soldiers, to neglect any means for their preservation. They accordingly introduced surgeons into their armies; under the name of *medici vulnerarii*. One of these officers was appointed to each of those formidable legions, that were victorious, successively, over the enemies and the liberties of Rome. They were found to have rendered such valuable services to the troops of the republic, that under Augustus, and in spite of the laws and national prejudices against physic and physicians, which defaced the Roman character, they obtained the privilege of the freedom of the city. The emperor, moreover, added to this benefaction, other favors of the most complimentary and substantial kind. The legionary surgeons were permitted to decorate themselves with the badges of the knights, and were exempted, like distinguished soldiers, from all taxes and public charges. Thus was exhibited among the Roman people, a discrimination in favor of the surgical branch of the healing art, which has been realized, to a greater or less extent, at all times, among all people. Though subordinate to medicine through a great part of their history, by the edicts of pontiffs, and the curricula of universities, surgery, has ever, like wisdom, been justified of her children—the results of her healing ministrations, commending them to the gratitude of humanity, with the assurance of benefit, which the more recondite and unintelligible processes of medicine, can seldom inspire. And thus it happened that the humiliating preeminence which the physicians had usurped over the surgeons, was abolished by the force of opinion, long before it had been abrogated by any law.

As to the character of the services which secured such consideration for the military surgeons of Rome, we have very inadequate means of forming a judgment. Dr. Donald Munro, who seems to have searched the ancient authors with



great care, for information on the subject of military hospitals, and the manner of treating the wounded in battle, reports that no ancient author, either historian or physician, that he had met with, has furnished any satisfactory account of either of these particulars.

Probably, the military surgery was not above the current practice of the day, and that was indifferent enough, if we may estimate it by some curious instances recorded by the elder Cato, who may properly enough—though the fact is a strange one—be styled the earliest writer on medicine, among the Romans.

We do not refer, then, to any of the early examples of military surgery at which we have glanced, for any practical lessons in the art; but only in evidence of its early cultivation, and for the curious historical associations, that, in some instances, marked its exercise. Its resources and appliances, however, had some general and effective correspondence with the character of the injuries for which they were employed. Except such wounds as were speedily fatal, the rude engineering and struggles of ancient combat, inflicted few that could not be managed by the simple practice of their day, which, tried, indeed, by the exigencies of modern warfare, would prove frivolous and inadequate in the extreme.

A single well-directed discharge of a six pounder, loaded with grape or canister, may prepare more professional duty for the surgeons of the advance forces, than the hardest days' fighting did on the plains of Troy, or the charge of a thousand knights in Palestine, led on by Richard, the Lion-hearted, himself.

The introduction of gun-powder and fire-arms among the agencies of battle, revolutionized all the elements of warfare, and none more completely than martial medicine, introducing to the notice of the surgeon, a new species of wound, which, for a long time, confounded his science, baffled his remedies, and so invited, in treatment, the wildest empiricism and most absurd expedients. These wounds were as much beyond the lights of science of the day, as were those inflicted by the unerring rifle of Leatherstocking, refractory to the simple surgery of Dr. Sitgreaves.

The sanguinary wars between the various states of Europe, beginning with the thirty years' war of Gustavus Adolphus, and terminating with the memorable battle of Waterloo, gave birth and developement to the military surgery that we recognize as a professional speciality at the present day. The medical staff became, by degrees, to be an essential particular, in the great military establishments of this period.

It is gratifying to the medical philanthropist, especially, to reflect that the series of wars, which, for more than a century desolated the finest regions of the European world, and drenched their fields in blood, served to systematise and multiply the means of averting much of the incidental, and softening much of the unavoidable misery of war—even from the multitude of victims, extracting antidotes to the waste of human life.

The integrity and efficiency of those vast standing armies, which then began to burden the nations, could only be maintained by sanitary regulations and hygienic police, for which, whether applied to the circumstances of camps or cities, the world is indebted to beneficent and enlightened medicine. The duty and responsibilities of the surgeons became, indeed, vastly augmented; but the service, proportionably, more liberal and dignified, as his department participated in the general advancement of military science, and as the whole philosophy of medicine was drawn into requisition, no less to protect the soldier against the exposures of the camp and the march, than to relieve and preserve him when wounded in battle. Nobly have these high requisitions of humanity and science, been answered by the devoted men, who have represented our profession in the armies of Sweden, Germany, Prussia, and, especially of France and Great Britain. They may be said to have created a new science, or sub-science, out of the most chaotic materials. They have demonstrated the efficacy of medical science, in preserving health, and prolonging life, by improving the opportunities offered them, of applying its principles under conditions and circumstances so definite and arranged, as to render the results unquestionable; and, moreover, while faithfully discharging their first duty—that which the physician owes to the object of his

care,—they have not been unmindful of the second—that which he owes to the progress of his profession—but have gathered up, from the experience of their campaigns, abundant stores of facts and observations, which have enlarged the bounds of professional knowledge, and materially contributed to its curative resources, as well in the civil, as in the military sphere of its exercise.

If it were necessary to justify these eulogia by examples, the time of this exercise would scarcely suffice even to name the men, who, as military surgeons, have won the confidence and admiration of the great commanders under whom they have served, been idolized by the troops, as indispensable to their preservation, alike in camp and field, and venerated by their professional brethren as the highest authorities in important sections of practice.

How otherwise, for example, could I speak of that admirable man, Ambrose Pare, the acknowledged father of military surgery, who was distinguished among his contemporaries, and in history, by all the attributes that dignify and decorate professional life and character. To the intrepidity of a hero, he joined the philanthropy of a Howard. Accomplished, as was no one else, in the very highest exercises of his art, he would, nevertheless, condescend to the most subordinate offices, to preserve or relieve the objects of his care. The surgeon of four successive French monarchs, and the counsellor, as well as physician, of his august commanders, he was, equally, the devoted friend of the common soldier.

“His humane and skillful attention,” says Mr. Ballingall, “brought Pare into so much repute amongst the French soldiery, that we find their princes and generals willingly took the field, when they could prevail on Pare to go out along with them; and at the time when all the noblesse of the kingdom were shut up in Mentz, which was besieged by Charles V, in person, at the head of a hundred thousand men, they sent an embassy to the king, their master, beseeching him to send Pare to them. An Italian captain, for a great reward, introduced him into the city, and they instantly sent, at midnight, to awaken the prince who commanded the garrison, with the good news of his arrival. The governor beg-



ged him, that he would go next day, and show himself at the breach. He was received by the soldiers with shouts of triumph—we shall not die now, even though wounded, for Pare is amongst us!” Mentz, was at this time, the bulwark of France, and it has always been ascribed to the presence of this single man, that they kept the city till the gallant army that lay around it, perished beneath its walls.

A wise physician, skill'd our wounds to heal,  
Is more than armies to the public weal.

ILIAD.

The wars of the revolution, while they served to perfect the system of martial medicine, which Pare and his immediate successors had instituted, were also prolific in men of whom we can hardly speak in terms of undeserved eulogium. “*Primi inter pares*”—conspicuous even in the galaxy of brilliant surgeons, with which the genius and discrimination of Napoleon had blessed the French armies,—stand the two Barons, Percy and Larrey. These two great men, successively “inspectors general” in the medical staff of the French armies, independent of their strictly professional merits, exhibited administrative talents, equal to those of any of the ministers and marshals who contributed to the glory of the empire. Masters of the pen as well as of the vistroury, they have transmitted to us memoirs of their experience and records of their practice, in perusing which, we may well doubt whether those who were favored with their personal attentions, or those who, ever since, both in civil and military practice, have been receiving the fruits of their improvements in surgery, have been laid under the weightier obligations to their professional genius and devotion.

Percy was the medical adviser of Napoleon, throughout his memorable campaigns upon the Rhine, and the great captain has often confessed that without the hygienic counsels of his surgeon-in-chief, he never could have maintained the health and efficiency of his troops, under the forced marches and rapid concentration of men, which constituted the very *genius* of his warfare. After one of their great battles, Percy was the first to receive those encouraging words of approbation, with which his great commander knew so well to recompense

those, who had signally contributed to any of his achievements. "Percy," said he, "I have observed your conduct, and that of the surgical corps under your direction, in the conflict just past, and I congratulate you upon having created a *heroism* of the *healing art*, not less admirable than that which belongs to the art of war. Be assured that such skill and devotion shall not fail to share in the choicest rewards that a grateful nation has in store, for those who vanquish her enemies.'

A more brilliant, but trying field of scientific effort opened to Larrey, in the campaigns of the East. The inhospitable climate, and terrible epidemics of Egypt, were added to the ordinary exposures of military life, and the sanitary regulations of the army, to be wise and efficient, demanded, in their chief originator and administrator, a rare combination of acquirement and talent—various and accurate information, with the ability and habit of applying it to every exigency—a mind fertile in expedients, and confident in its own resources and determinations, with a faculty of imparting that confidence to those whom it is either to direct or serve. Fortunately for the French army, such a man was found in the inspector general, Larrey. Read his "Memoirs of Military Surgery," and his "Historical and Surgical narrative of the Army of the East, in Egypt and Syria," and you will not be surprised at the compliment paid him by Napoleon, when reprimanding him for having allowed himself to be carried into a position of great danger, in the discharge of some professional duty. "Take better care of yourself my friend—there are many excellent generals in the army, but only one Larrey."

Those interesting volumes, wherein he has deposited the fruits of a long and courageous experience, in the midst of camps and the tumult of arms, are so replete with professional enthusiasm, and interspersed with the general incidents of the campaign, that the reader is charmed and interested alike by the author and his productions.

His extraordinary merits were remembered by his illustrious chief to the last. In his will, Napoleon complimented him, by a legacy of 100,000 francs, accompanying the bequest

with the remarkable testimony, that Larrey was the most virtuous man he ever knew.

But it is not only in France, that we find military experience developing noble specimens of surgical character. Thomas Gale, one of the most distinguished of the old English surgeons, followed the British armies in most of the wars of Henry the VIII, and the succeeding monarch. He was the special surgeon of Queen Elizabeth, and, in the prime of life, like most of the British surgeons since his time, with the advantage of a reputation gained in the army, returned to civil life, and became an eminent practitioner of surgery in the metropolis. He was a leading medical author in his day, his principal production being a treatise on gun-shot wounds, at that time a comparatively novel subject, which he discusses, mainly, with the view of controverting the prevalent idea of the venomous character of those injuries. He was a contemporary of Ambrose Pare, and, if we may credit his own account of the matter, like his great continental confrere, introduced a new era in the military surgery of his nation. Not long afterwards, we have Mr. William Clowes, a naval surgeon, who figured as an author in his day; and following him, Mr. Woodall, publishing, in 1570, what may be considered the first treatise on military surgery, in the English language, in a little volume entitled, the "Surgeon's Mate."

Amid the civil wars of the seventeenth century, appears another of the patriarchs of English surgery, indicated by Prof. Miller, in the introduction of his late admirable volume, as "The true Father of British Surgery, our own Wiseman, the Pare of England."

He accompanied Prince Charles, when a fugitive, to France, Holland and Flanders. After an experience of three years in the Spanish army, he returned with his royal patron to Scotland, and was taken prisoner at the battle of Worcester. After his liberation, he settled in London, and became an eminent practitioner and medical author. He was principal surgeon to Charles II, and is represented as a cavalier, "sans peur et sans reproche." He wrote and published on a variety of subjects—tumors, ulcers, fractures, gun-shot wounds, kings-evil, &c. &c. It is not easy, by the way, to

reconcile his honesty with his sagacity, in the account he gives of the miraculous effects of the king's touch, in the last named species of disease. This was, however, one of the prevalent delusions of his time, and we must remember, in his favor, that the fascinations of witchcraft and clairvoyance, have, each in its day, led captive some of the most able and conscientious men the world ever knew.

Bishop Tanner, in a notice of some of the remarkable men of these times, bears testimony to the purity, disinterestedness, and remarkable benevolence of Wiseman's character. "In a period of general licentiousness," says the venerable prelate, "this exemplary gentleman preserved his integrity, and among all the conspicuous personages of that profligate court, he was, probably, the only one for whom neither truth nor scandal had any accusation."

Do not think it amiss, gentlemen, that I have digressed into these biographical details. Having formally connected yourselves with the great medical family, you should not remain ignorant of the rich inheritance to which the relation entitles you, in the excellencies and fame of our professional fathers.

Theologians may dispute about the dogma of supererogation and the communicability of the sanctity of holy men; but, undoubtedly, there is a way in which the secular merits of the departed, are made of account to posterity, besides and beyond the ordinary and material benefits they transmit. No one can dwell upon the memories of the great and good, without feeling, like the woman who touched the garment of the great Physician of Nazareth, "that virtue hath gone out of them."

I am sure of being a better surgeon for my patients, and a better teacher before you this day, for my familiarity with the character of Pare, independent of any improvement derived from my imperfect acquaintance with his works.

Yes, young gentlemen, if ever, amidst the dull and irksome routine of study, or the more dull and irksome novitiate through which most of you must pass as practioners, you shall become disheartened, and falter in the career before you, repair to the pages of surgical biography, whereon are

inscribed the lives and characters of the illustrious men they commemorate. The contemplation of their excellencies will re-animate your drooping spirits, a new enthusiasm will be kindled within you, and a noble emulation, casting out despondence, will constrain you to press on "towards the mark of the prize of the high calling" to which you have devoted yourselves.

If we turn now from what is personal, to what is institutional, in the system of military surgery created by the wars and policy of modern Europe, we shall still be attracted by that of France, and admire, not less the completeness of its organization, than the talent and enthusiasm of those who have administered it.

Under the august patronage of Napoleon, it attained a degree of perfection, which the other continental potentates acknowledged, and imitated, but never realized.

This system embraced three particulars, or portions of service:

1st. The *surgery of battle*, as it was termed by Baron Percy, who was, in truth, its originator—or arrangements for supplying immediate succor to the wounded soldier on the spot where he fell.

2d. *Field hospitals*, where the sick and wounded can be treated in comfortable quarters, within the lines, and under the protection of the army.

3d. *Permanent military hospitals*, established in the principal garrisoned towns of the empire, where infirm and wounded soldiers, are received and treated by medical officers of the army, in peace and in war.

Formerly, in all armies—and in all but the French, I understand, at the present time—the surgeons, during an engagement, remained in some safe and convenient place, in rear of the columns, and waited for the wounded to be brought to them for such attentions as they required. But in the battles of Napoleon, they accompanied the warriors into the combat, partook their dangers, and were present to succor and relieve them, as soon as stricken down.

Nothing could be better calculated to reassure and encourage troops, amid the chances of the fight, than the idea of



this immediate attention, if they were so unfortunate as to suffer.

The corps of ambulance surgeons, organized by Percy, borne upon the light cars invented for the purpose, traversed the field of battle with the utmost dispatch, rushing into the midst of the ranks to seek the wounded, and rendering the beneficent services of their art, under showers of balls, and in the midst of the carnage of the conflict—exhibiting a zeal, an address, an intrepidity, which was properly styled by Napoleon, “heroism,” and the reports of which filled the medical world of the day, with astonishment and admiration.

*Field hospitals* were first introduced into the military establishments of modern Europe, by Henry IV, at the siege of Amiens, in 1747. So sensible were the soldiers, of the melioration of their lot, effected by these new establishments, that that memorable expedition was familiarly designated by them, “the velvet campaign.”

Something analogous to these hospitals, was undoubtedly in use in the Roman armies under the emperors, when the government of distant provinces, and the belligerent temper of the nation, had inflicted upon it those remorseless and bloody agents of its degradation and ruin—standing armies. Curious enquirers into the history of the matter, assure us, that at the time of Trajan, although without military hospitals of any kind, strictly speaking, there were ambulances provided for all large divisions of troops.

Vegetius, in his volume, “*de re militare*,” which is quoted by Dr. Ballingall, and other authorities, with great respect, gives us some very precise details of the manner in which the Roman soldiers were treated, when sick or wounded. He describes the receptacles for the sick, which they formed in their camp—tents furnished for that purpose. The duties of these *field hospitals*, as they may very properly be called, were performed by medical officers, under the inspection of the “prefect of the camp.” It seems probable that each legion had its ambulance, as we have already seen that each had its surgeon, when the administration of military affairs had reached the degree of perfection which this author indicates.

Since the time of their introduction by Henry, as noticed above, these establishments have made an essential and favorite part of the French system, and, under the name of regimental hospitals, with various modifications of discipline and economy, exist, I believe, in all well appointed modern armies.

The principal permanent military hospitals in France, are in the cities of Paris, Mentz, Lisle, and Strasburg. The medical historians of that nation, generally attribute the commencement of these institutions to Cardinal Richelieu. During the reign of Louis XIV. the standing army of France is said to have reached the astonishing number of more than 400,000 men, and the minister endeavored to give to every part of the military administration a corresponding developement. He accordingly established a military hospital, in every fortified city of the kingdom.

About the middle of the eighteenth century, schools for instruction in military surgery were connected with the hospitals in Lisle, Mentz, and Strasburg, and continue to the present time. The course of study in these institutions, at least, in the one at Strasburg, is as complete as that of either of the regular medical schools in the country, and it is an interesting historical fact, that clinical instruction which has now become so universal, and is considered so essential to a practical medical education, was first practiced at these French military hospitals. Immediately after the peace of 1763, Richard, the inspector general of military hospitals, proposed to the government, the publication of a journal, which should concentrate the experience of these institutions, and form a sort of body of doctrine, for the benefit of the younger practitioners in the army. This work ceased after the publication of two valuable volumes; but was re-established by the government, in 1816, under a new title, and has continued to be published, I believe, to the present time.

The few facts that I have thus briefly submitted, serve to show how very extensive and perfect, is the system of military medicine, in that extraordinary nation, which, in many periods of its history, has literally been, as it has often been styled, one great camp. It is honorable, alike, to the science

and the humanity of this gallant people, that no part of their military establishment is devised with more talent, nor maintained with more liberality, than that which is devoted to the restoration of sick and wounded soldiers.

Although their German neighbors have enjoyed frequent opportunities of witnessing the system of medical service and instruction of the French armies, manœuvring and fighting on their own territories, either as allies or enemies, they do not seem to have adopted it as a whole, nor to have introduced any modifications calculated to satisfy, more completely or conveniently, the sanitary necessities of their standing armies.

In the armies of Austria and Prussia, when actively engaged in the field, the medical service is administered on nearly the same principles, as among the French—a single officer, usually named “surgeon-general,” directing every exercise of the healing art—but in the department of ambulance duty, and in all the details providing immediate and adequate attendance upon the wounded in battle, they are altogether behind their gallant exemplar.

The governments of each of these powers, has established special schools of military medicine and surgery, founded upon the model of the French hospitals of instruction. The most celebrated of these institutions, is “*L’Academie Josephine*,” founded by the emperor Joseph II, at Vienna, in imitation of one he inspected at Strasburg, and designed for the instruction of medical men, destined to serve in his armies.

The Russians, who have imitated, in most things, the scientific institutions of the other people of Europe, have adopted, with slight differences, the German system of martial medicine. Until very lately, moreover, they not only borrowed foreign institutions, but depended on foreign subjects for their administration. No longer than twenty years ago, all their most distinguished medical officers, in field and hospital service, were either Englishmen, Germans, or Frenchmen.

Spain, so far behind the other European nations in every thing else—a people absolutely without institutions, except a despotic and rapacious priesthood—has neither military nor



civil surgery, as the product of her own genius and patronage.

She has surgeons attached to her imbecile regiments, but most of them are either Italians, or Savoyards, or French. Towards the close of the last century, the king of Spain determined to establish, at Barcelona, a "a medico-chirurgical college," designed for the education of a suitable corps for the army. But the Universities, affecting to see in the establishment something derogatory to their rights and privileges, carried their remonstrances to the foot of the throne, and, being sustained, as conservatives or old hunkers in all countries are, by the court physicians, the royal decree was revoked, before it had been put into execution.

The English people and government, as in most other things, so in the matter we are considering, have shown themselves more sensible than their European neighbors. Without the array of hospitals and schools of special military instruction, with only a single chair in all their medical schools, devoted exclusively to military surgery, they have had with their armies, whenever engaged in active warfare, an abundance of excellent medical men, and surgeons, competent to afford to their wounded soldiers, all the aid which the choicest resources of the art could supply. The policy of the government there,—the sentiment and the habits of the profession concurring—has been to regard the medical department of the army, when on the peace establishment, as a school of practice for young surgeons, rather than a distinct calling for medical men to covet for a livelihood; and, in time of war, to depend upon the attractions, which the opportunities for surgical experience then presented to ambitious and skillful practitioners, for the men to discharge the most important duties of the medical staff. In this way, they have, in successive campaigns, secured the services of Hunter, the Bells, the Coopers, Guthrie, and a host of others, among the brightest ornaments of British surgery, who never would have condescended to make part of the machinery of a military establishment, nor to connect themselves with a detachment of that great profession, of which, in all its integrity and glory, they were acknowledged leaders.

As to the military surgery of our own country, regarding it as a distinct system or species of professional service, it can hardly be said to have an existence. Fortunately forbidden by the constitution of the nation, as well as by the experience of our wars, to maintain standing armies—the few scattered companies of men we employ to preserve our fortifications, and protect the frontier, not deserving to be so styled—we have no masses of habitual soldiers, whose peculiar habits, regimen, exposures and morbid tendencies, render necessary or expedient a specially educated set of medical officers, for the management of their diseases, in peace or in war. It is more and more becoming a settled determination of our people, that all the exigencies of war, may, and must be met extemporaneously, if I may so say.

When the welfare or honor of our country is to be maintained by battle, the hardy yeomanry of our land, whose sagacity, bravery, and patriotism, are equivalent, in effective fighting, to years of drill and camp service, constitute the rank and file of our armies, their more prominent fellow-citizens are selected as their leaders, and the medical adviser of the home, becomes the surgeon of these republican soldiers, in the field. Repeated experience has demonstrated the efficiency of this constitution of our armies, in all its parts.

Volunteer surgeons have been as ready and as reliable as volunteer officers. The profession has not been behind the laity—if I may so speak—in responding to the calls of patriotism, in the day of battle. In the revolutionary war, Jones, and Warren, and Aspenwall, were compeers of Putnam, and Green, and Knox, in all the attributes of patriotism and gallantry, that signalized the revolutionary heroes. Many of the medical men in the colonies had received their education in the best schools and hospitals of Europe, and in every division of the continental army, some of these accomplished gentlemen appeared, to systematise the medical service, and to initiate, into the trying offices of surgery, those who had enjoyed no opportunities of being conversant with them before. They were among the men of the best blood, the best education, and best positions in the land.

It is matter of honest pride, in perusing the “American

Medical Biography,"\* prepared by one who was himself a distinguished instance of the fact, to remark how many of the most learned and eminent of the practitioners of the day, at great sacrifices of personal ease and profit, devoted themselves to their country, in professional attentions to her patriotic troops—nothing daunted, either by the inevitable hardships to be incurred, or the contingent severities that might await them, as participators in a rebellious warfare.

Benjamin Church, the first surgeon-general in the American army, was an eminent practitioner in Boston, when, at the instance of Washington, he assumed the arduous and responsible position of chief, in the medical staff of the infant army of the confederacy.

After finishing his collegiate education at Harvard University, he had repaired to Edinburgh, and graduated in medicine at her distinguished school. Besides some medical communications for the press, he exhibited his scholarship in a number of minor poems, which were highly complimented by the critics of the day.

Unfortunately, the reputation of his public service was sullied by suspicions of some treasonable correspondence, in consequence of which, he retired in disgrace, some time before the termination of the war.

Adams, the only son of the patriot Governor of Massachusetts, Samuel Adams, volunteered to dress the wounded men at the battles of Lexington and Bunker Hill, and continued a surgeon in the army, to the end of the war.

Aspinwall, a highly educated physician, and patriotic gentleman, of Brooklyn, Mass., sought, in the first place, a commission among those who bore arms in the cause of freedom, but was prevailed upon by Dr. Warren, to undertake duties more congenial to his professional pursuits. His heroism, however, carried him into the fight at Lexington, where he personally engaged in the conflict. He carried off from that bloody field, the dead body of his friend, Captain Gardiner, took it to his own house, and had it privately bur-

\* An excellent book, to which I am largely indebted for the biographical particulars that follow, as I am to several others, for the historical ones that precede.

ied by night, to avoid the panic that he feared would fall upon the people, from a knowledge of the loss of so many of their leading men.

Jones, of New York, the pupil and correspondent of Hunter, and Pott, and Petit, generously devoted, to the service of his country, professional talents and accomplishments that had already introduced him to a brilliant career in private practice. He was connected with the army, as regimental or hospital surgeon, through most of the important campaigns of the war. About the time of the commencement of hostilities, he published the first, and, I may almost say, the only volume of military surgery, by an American author. It was entitled, "Plain Remarks on Wounds and Fractures." It was reviewed very favorably by European critics, passed through many editions, and was found a most serviceable hand-book by his younger, and less perfectly educated associates, in the service.

Infirm health obliged him to retire from military life, before the termination of the war. He settled in Philadelphia, and was there the medical adviser of Washington and Franklin, and has left us evidence of his taste and talents as a writer, in some interesting notes of the last days and hours of the great philosopher.

James Craik, of Virginia, whose life for nearly half a century, was devoted, with zeal and high reputation, to the cause of his country, entered the revolutionary army better prepared for his official duties there, than most of his associates. He had been educated in Scotland for the medical service of the British army, and had served in the French war, under Washington and Braddock. He was second to no officer, of whatever rank, in the high estimation in which his services were held. "He was one," says Dr. Thacher, "and what a proud eulogy it is, of whom the immortal Washington was pleased to write—*my compatriot in arms, my old and intimate friend.*" He followed the fortunes of his great commander to the end of the war, and was present at the surrender of Cornwallis, on the memorable 17th of October, 1781.

Morgan, of Pennsylvania, the colleague of Shippen in founding the first, and most distinguished medical school in



the country, and Ramsay, of South Carolina, known throughout the world of letters, as the biographer of Washington, and historian of the revolution, were both among those who made great sacrifices, and rendered great services to the country when she was struggling for independence—giving their professional abilities to the army, during the greater part of the contest.

The surgical practice of the revolutionary campaigns, as might be expected in such hands, was remarkably judicious and skillful. One of the leading surgical questions of the last half century—that relating to the time for amputation in case of injuries involving the loss of limbs—was settled by these sagacious revolutionary surgeons, in conformity with the best modern authorities, and I may say the unanimous opinion of intelligent practitioners at the present day.

“During the war in North America in 1780,” says Baron Larrey, “the surgeons of the French army performed a great number of amputations, according to the prevailing opinion in France, that an operation should not be attempted until the primary symptoms had ceased. The Americans on the contrary, who had the courage to amputate immediately, or within the first twenty-four hours, when their wounded required it, lost but a very small number; and yet Mr. Dubor, then surgeon major of the regiment of Artois dragoons, of whom I learned the fact, asserts that the condition of the hospital in which the wounded French were accommodated, was, in many respects, superior to that where the wounded Americans were placed.”

At the commencement of hostilities in 1812, very few of the veterans who had adorned the profession in the war of the revolution were living, and in condition to take the field and impart to the new campaigns, the fruits of their past experience as military surgeons. Most of them had left the public service at the conclusion of the war. They had entered it, not for a livelihood, but at the prompting of patriotism. The medical corps of our regular army then, in 1812, was composed of gentlemen without martial experience, and I believe I may add, as a general observation, without any remarkable distinction as professional men. Most of the

medical duty of that war, was accordingly performed by volunteer practitioners, or by those who sought appointments only for the emergency; and, although I have access to no documentary evidence on the subject, except the "sketches" of Dr. Mann, the impression from all the information I have received, as well as from my professional acquaintance with several of the gentlemen thus employed, is, that it was very well performed.

I recollect distinctly, having seen, not long since, a handsome compliment, to this effect, from one of the British Surgeons, then on duty in Canada—Bransby Cooper, I believe—who had witnessed the practice of the American army surgeons, in the campaigns in that neighborhood.

Dr. Mann in his medical sketches of the war of 1812, &c., in a letter to the adjutant general says: "It is with much pride, this opportunity is improved to state, that the medical gentlemen of our army and navy were not inferior, but superior to the medical gentlemen of the British army, several of whom were made prisoners of war, and assisted to dress the wounded of their own fleet."

Later still, and too fresh in the recollection of all I address to require rehearsal, are corresponding facts in relation to the military surgery of the Mexican war. I intend to utter nothing derogatory to the surgeons of the regular army, when I say that the laboring oar of the medical service, in that war, was plied by the volunteers, and that the results of surgical treatment, where the circumstances were equally favorable, were far from being discreditable to those who were fresh from the active professional duties and stimulating competitions of private practice.

There were, undoubtedly, exceptions to this favorable estimation of the volunteer surgeons--there were some, indeed, among them whose appointment was one "not fit to be made." But the proportion of incompetents was not so great among them, as among the regulars. And how could we expect it to be otherwise, under the circumstances of the case? Most of the active surgeons then in service, had entered the army since the war of 1812, and, in the meantime, had been posted, some on the coast, and some on the frontiers, having in

charge a company or two of men, whose forced attention to cleanliness, regularity of life and dietetic observances, was calculated to keep them healthy, and among whom, in the piping times of peace that we fortunately enjoyed, there was little opportunity of treating wounds, or any surgical disease whatever. Probably more than one of those medical gentlemen, who may have become very accomplished in the routine of the barracks, in the display of a parade, or in the gallantries incident to garrison duty, or the recruiting service, had not managed a half dozen serious cases of disease, or even witnessed an important surgical operation for some thirty years. How could such an one assume, at once, and sustain, with any credit to himself or advantage to others, the terrible responsibility of a military surgeon in active warfare?

Mr. Guthrie, the most eminent military surgeon now living, bears testimony to the professional demoralization and incapacity, that are apt to result from a permanent connexion with the army. The martial element in a man's position, who is in the army for life, is too apt to predominate—the "tap of drum" and "word of command" habit of doing things, and the spirit of routineism, that is the sin most easily besetting a medical practitioner, in every sphere of his duty, to take the place of deliberation and science.

In a recent lecture Mr. Guthrie relates an incident of the Peninsular War, strikingly illustrative of the contrast, not only in respect to serviceable attentions to wounded soldiers, but even in meeting the peculiar emergencies of military experience, presented by the youngest surgeon in the British army of the Peninsula, and one of your old medical martinets, who had risen, by promotion, to the head of the medical staff of that gallant body of soldiers. "After two days' fighting at Elboden," he says:—"I had three hundred wounded of all arms, without knowing what was to be done with them, as a further retreat was ordered. At midnight I saw the last wounded man out of the village; and at day-light, when near Alfaïates, I found the head of the medical department of the army, sitting on a pannier by the road side, and apparently keeping guard over some twenty or thirty others, arranged

in a semi-circle around him. He was one of the best men in the world; but having slept out all night, looked as unhappy as need be, for a man not used to it, and not a little frightened withal. It was impossible to avoid laughing, when he quietly said—‘I am here taking care of the medical stores of the army, whilst the apothecary is watering the mules, lest the muleteers should run away with them.’ ‘I have seen,’ he added, ‘a great many wounded passing—are they yours?’ I bowed, and asked him if he had told them where to go.—No—he had not interfered, for he did not know where to go himself—he did not know the country. I assured him the French would be up in about half an hour, and that he had better make up his mind, on that point, he would, however, see their brass helmets at least a mile off, and that he had then better be off as fast as possible. The apothecary now returned with the mules, and such a packing took place—but where to go was the question. I ventured to recommend Tobugal as it would be in the rear of the position the army was about to take up, and from which I did not think, as the troops were all assembled, it would be readily dislodged; but that I should, with his permission, stop at Alfaiates with my wounded. I ventured even to add, that the contents of some of the panniers would be very acceptable; might I take some few things out as the cortege went through Alfaiates? ‘Oh yes, I might do as I liked, and take any thing I pleased.’ ‘And you will not disown,’ I added, ‘any thing I do.’ ‘On no, provided that you do not disobey orders.’ This was not quite so satisfactory, as I knew I could do little else, it being contrary to all order being there at all.”

In this connexion, however, it is but justice to remark, that several of the medical gentlemen now, or lately in our military service, have proved themselves superior to the unfavorable influences of their position, have maintained character as practitioners, and furnished contributions to the progress of medical science, that would do honor to any member of the profession.

As in the past, so will it be in the future—our country must still look to the great body of the profession, for the surgeons of her armies, when in active service, and not to a permanent



corps of specially trained soldier-doctors, whose associations, habits of life, and incentives to action, are none of them congenial to the tastes, nor tributary to the progress of men of study and science. The art of healing maladies and wounds, by manual proceedings, recognizes the same elements, and is acquired by means of the same studies, whether it be exercised in opulent cities or tranquil villages, or carry its beneficent services into the midst of camps and the horrors of battle. The surgeon, enlightened by sound doctrine, and rich in the lessons of experience, is equally fitted to fulfil his ministry upon all individuals, and under all circumstances. We speak of military surgery, therefore, in reference to an institution, and not to the science, which is itself invariable.

This sound doctrine, so essential and so sufficient for every sphere of medical duty, may be attained in any of the respectable medical schools of the country, in some of which most of our practitioners have acquired the elementary portions, at least, of their medical education. In those institutions the pupil should be made conversant with the military contingencies of his vocation, and prepared for their performance, as far as the limited time allowed for their general instruction will permit. More attention should be bestowed, than is usually done, upon the consideration of gun-shot wounds, and upon those diseases or complications to which the circumstances of military life expose the soldier. There is not enough that is special in the preparation of practitioners for those duties, to constitute the entire function of a professorship; but the curricula of our schools would be improved by assigning the subject of military surgery, as many do that of medical jurisprudence, to a particular chair, so as to secure for it a determinate and adequate portion of the instruction of the course.

After considerable inquiry as to the actual manner, in which the surgical portion of military service is administered in our armies, during active warfare, but two suggestions have occurred to me, calculated to introduce material improvements into the details of the system.

In the "surgery of battle" we may take lessons of the

French, not indeed by sending surgeons into the field during the conflict, the advantages of which, I am persuaded, are rather specious than real; but by imitating, or improving upon their provisions for the speedy and gentle transportation of wounded men, from the spot where they fall, to the field hospitals, or to some secure and convenient position, where the surgeons are ready to render the first services of their art, with all possible dispatch, but with the composure and deliberation essential to the proper performance of all surgical operations. A variety of cars, vehicles, litters, barrows, &c., have been invented for this purpose, the best of which should be at hand in all battles, and a sufficient corps of men detailed to employ them efficiently. I understand that in some of our recent most severe battles, no such apparatus was in use, until some were captured from the enemy.

In the second place; besides the regular quota of regimental surgeons, there should be appointed to every considerable body of men—say to every brigade—a medical officer whose position, duties, and if you please, his title should correspond to those of consulting physician or surgeon in private practice. The office should be made one of dignity and consideration, with rank and emoluments at least equal to those of a brigadier general, so as to invite to the place, practitioners of decided talent, experience, and skill. No operation involving serious mutilation, should be performed without consultation, except under the most urgent circumstances, and every obscure and obstinate case should have the same advantages of multiplied counsel that are so generally desired and obtained in civil life.

While the medical profession acknowledges its obligation to be prepared for this species of public service, and its members hold themselves ready for the duties of the field, whenever their country calls, the country in turn, by its agent, the government, should reciprocate the benefit, by employing every means in its power to elevate the profession, and inspire patriotic purposes and aspirations in its members. There is but little, indeed, which our general government can do, constitutionally, for the promotion of science and art, in any of their forms—having no crosses or decorations to dis-

tribute, no titles to confer, and no pensions to bestow as temptations to vanity, or rewards of devotion. But there are a few instances of patronage which might be so administered as to operate as powerful incentives to medical effort.

This salutary influence, is but very imperfectly realized under the existing method of administration, and a great injustice, I respectfully submit, is the consequence, to the cause of medical improvement, and to those ambitious and indefatigable men who have a right to participate in all the honors and distinctions which the institutions of their country have to bestow upon medical merit.

Comparing the action of the government, in this species of patronage, towards the two secular professions, the injustice and inexpediency of the present course, will be, at once, apparent. When a Justice of the Supreme Court is to be appointed, the executive does not limit his choice to the bench of the district courts, but casts his eye over the whole field of juridical merit, private and official, within the circuit, and by this practice not only secures to himself a better chance of a good selection, but presents perpetually to the whole bar, a prize calculated to stimulate to the utmost every noble-minded and aspiring lawyer.

So too, when a President is calling to his cabinet an Attorney-general for the nation, is no one thought of for the place, but some member of the corps of district attorneys, who claims it by seniority, or some other conventional principle of promotion? Far otherwise. High legal reputation, and eminent forensic talents, are the only "anterior titles,"—as the French say—to this distinguished position, which thus becomes the source of a widely diffused emulation, highly promotive of learning and usefulness in the bar.

How is it now in the distribution of a similar species of patronage in the other profession? A Surgeon-general of the army, or the Chief of the bureau of medicine and surgery for the navy, is to be appointed, and none are in the "line of safe precedents," except the little corps of army or navy surgeons, as the case may be. This mere fragment of the profession, with no more merit as physicians or citizens, than thousands of their brethren throughout the land, are the

only persons intrusted in the distribution of public honors, which, otherwise awarded, would animate and encourage the cultivators of the healing art in all parts of the country.

Wherefore is it that these appointments are managed so differently in the two professions? Is there any reason in the nature of the one case or the other, in the rights of parties, or in general considerations of public policy, for this marked and mischievous disfranchisement of medical men? The duties of these chiefs of the medical staffs of the army and navy, are advisory and administrative, like those of cabinet officers, and there is no more propriety in requiring them to have personal experience in the details of camp or ship service, than there would be in requiring the secretary of the navy to have been a boatswain's mate, or the secretary of war an orderly sargeant.

Who can doubt that a medical bureau at Washington, would have found as competent a chief in our distinguished Physick, as did the chief-justiceship in his illustrious patient; or that our veteran Emeritus of Lexington, would have graced such a professional position as much, as does a lawyer of the neighboring city of Frankfort, that of attorney-general?

Furthermore—there are boards of examiners, occasionally or periodically instituted by the government, to pass upon the qualifications of those who desire to enter the medical staff of the army or navy, and, for this duty, a certain number of the corps are detailed by their chief, as other officers are detailed for courts-martial, or as one of their own number would be detailed to superintend a flogging, or to condemn tainted beef. Now, I submit that the function of these boards is not military, but scholastic, and that much more suitable persons could be summoned by the government from the body of the profession, than are likely to be found, or than are, in fact, generally to be found among the medical men of the regular army. The subjects of these examinations are generally young gentlemen recently from the green rooms of our colleges, or, at any rate, entirely inexperienced in the duties of the camp or field, and, of course, are not expected to be tried on technicalities, nor on questions respecting which the army or navy surgeons might be of use as experts, but only

on questions of medical science and practice, which involve the qualifications that are alike essential for military and civil service. It would be absurd to expect military qualifications in the recent medical graduates, who present themselves to these boards of examination, and it is ridiculous, therefore, to insist upon the necessity of military qualifications in the examiners themselves. But, besides these negative objections to the present constitution of these boards, there is a positive one more serious still. The medical staffs of the army and navy are thus made, respectively, self-perpetuating, public bodies. The present members of the corps, holding their official privileges for life, have the power of determining who shall be their successors, or who their new associates in case of vacancies. Whoever considers the potency of the esprit-du-corps—how liable it is to degenerate into partialities antagonistic to the general welfare, will find abundant reason to distrust the proceedings of a board of examiners, whose decision is not only to determine the qualifications of a surgeon for the public service, but also to admit a new member into their privileged and exclusive community—the terms of good-fellowship by no means necessarily corresponding to the qualities that are essential to a good practitioner of medicine and surgery. A much better method to secure a thorough and unbiassed examination of the candidates for medical commissions, would be, to call together from different parts of the country, a suitable number of gentlemen who are distinguished, in their respective communities, as scientific and skillful practitioners, and to constitute the tribunal, in all respects, so as to render it a dignified exponent of professional character, and a membership in it a worthy object of professional ambition. The government would have only to instruct such a board to maintain a high standard of qualifications in its requisitions, and it would be done, in reality, and not in pretence merely, as is too much the case under the present manner of proceeding. The double purpose would thus be accomplished, of providing for the candidates a competent and disinterested board of examiners, and of employing the patronage of the government, so as to operate



as an incentive to medical effort and distinction throughout the profession.

The earliest board of examiners, for the army medical service, consisted of Drs. Holton and Taylor, two eminent practitioners, without either military experience or prestige to qualify them for the duty. The venerable author of our medical biography, tells us, that at the time of writing his interesting book, between 1820 and '30, he remembered well the rigid examination that he underwent before these gentlemen, in 1775. If the administration of our modern boards, could point, as the result of their discrimination, to such a corps of surgeons as were passed by the old revolutionary board of private physicians, it would be a better argument against the reform I would advocate, than any that I am now aware of.

A far better method, however, than these special examinations, whether by 'boards-martial' or 'boards-civic,' for supplying the ministers of war and the navy with suitable material for replenishing their respective medical corps,—would be the following:

Let the faculty of every medical school of good standing, in the country, annually confer upon one, two, three, or more as need may be, of the most accomplished and meritorious of their graduates, certificates of qualification for army or navy preferment, and let the delivery of these certificates make a part of the public exercises of the commencement. Then, as many of these nominees, as desired to receive a commission in the public service, need only transmit their certificates, bearing, of course, their name and address, to the proper bureau at Washington. The secretary would then have before him, the names of the most promising medical young men, in various parts of the country, and could make his selection for surgeons, according to any principle of choice that might be deemed best. By this method of designating candidates for commissions, the government would be saved the trouble and expense of assembling examining boards; the young men would be spared the expense of traveling to and from the place of meeting—an expense that is an absolute bar to the ambitious and patriotic aspirations of many a worthy but indigent young man, and the medical schools would

be furnished with a species of stimulus and incentive to study in their classes, more effective than any scheme of prizes or scholastic honors that can be devised.

At the risk of being thought a reformer running into radicalism, I would further suggest, in order to secure a competent corps of practitioners, at all times, for the army and navy, the following additional modifications in the constitution of those corps, not necessarily connected, however, with the new method of nomination just recommended.

In the first place, let no one of the nominees be commissioned until two years after the date of his certificate, so that he should carry with him into the public service, some measure of experience as a practitioner—and, in the second place, let him be commissioned, not for life, but for some suitable limited time—say four or five years—so that he would not sink the physician in the soldier, and allow the medical qualifications he possesses to rust out, for want of motive to keep them bright; but so that, bearing in mind his return to the competitions of private practice, he would improve all opportunities he may have to enlarge and diversify his experience, and employ the abundant leisure afforded by his position, in accumulating stores of medical knowledge with which he will renew his professional duties in society, a more accomplished medical scholar, as well as a more accomplished gentleman, from the opportunities of social culture with which the military life abounds.

Similar objections to those I have stated, against filling up examining boards from the ranks of the army, are equally applicable to the practice of taking from the same corps, the medical constituents of commissions organized for determining the location of arsenals, hospitals, &c.; better men for the service can generally be found in the profession at large, and this arbitrary limitation of eligibility to positions of distinction and honor, is in derogation of the rights of private physicians and surgeons, and prejudicial to the advancement of their calling. The medical profession, like agriculture, commerce, and manufactures, is one of the great estates of the nation, and these official privileges, of which I have been speaking, ought to be regarded as a part of its

franchises, intrusted to the government, not for the advantage or gratification of its own stipendiaries, but primarily for the service of the state, and incidentally for the benefit of that venerable community by whose beneficent efforts, through many ages, have been developed that science and art whose aid is invoked in all these medical appointments—the science and art of healing—which crowns with the blessing of health the manifold felicities of peaceful life, and lays upon the altar of patriotism, such precious sacrifices to meet the dreadful casualties of war.





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